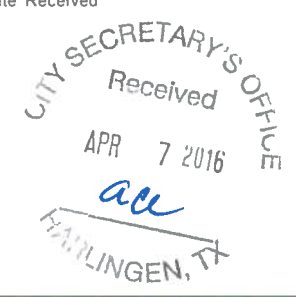


# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		<b>1</b> Filer ID (Ethics Commission Filers)	<b>2</b> Total pages filed:								
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR      FIRST      MI Mr.      Christopher      H. NICKNAME      LAST      SUFFIX Boswell		<b>OFFICE USE ONLY</b>  Date Received    Date Hand-delivered or Date Postmarked 4-7-16 3:43 P.m.								
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;    APT / SUITE #;    CITY;    STATE;    ZIP CODE 1001 Stack Cir., Harlingen, Tx 78550										
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	AREA CODE      PHONE NUMBER      EXTENSION (956 )      428-9191										
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR      FIRST      MI Ms.      Anita NICKNAME      LAST      SUFFIX Boswell		Receipt #      Amount \$  Date Processed  Date Imaged								
<b>7</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);    APT / SUITE #;    CITY;    STATE;    ZIP CODE 1001 Stack Cir., Harlingen, Tx 78550      78550										
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION (956 )      421-2626										
<b>9</b> REPORT TYPE	<table style="width:100%;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input checked="" type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>			<input type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)
<input type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)								
<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)								
<b>10</b> PERIOD COVERED	<table style="width:100%;"> <tr> <td style="text-align: center;">Month    Day    Year</td> <td style="text-align: center;">Month    Day    Year</td> </tr> <tr> <td style="text-align: center;">01    16    2016</td> <td style="text-align: center;">04    06    2016</td> </tr> <tr> <td colspan="2" style="text-align: center;">THROUGH</td> </tr> </table>			Month    Day    Year	Month    Day    Year	01    16    2016	04    06    2016	THROUGH			
Month    Day    Year	Month    Day    Year										
01    16    2016	04    06    2016										
THROUGH											
<b>11</b> ELECTION	<table style="width:100%;"> <tr> <td style="width:40%;">                     ELECTION DATE                      Month    Day    Year                      05    07    2016                 </td> <td style="width:60%;">                     ELECTION TYPE  <input type="checkbox"/> Primary    <input type="checkbox"/> Runoff    <input type="checkbox"/> Other Description  <input checked="" type="checkbox"/> General    <input type="checkbox"/> Special                 </td> </tr> </table>			ELECTION DATE Month    Day    Year 05    07    2016	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special						
ELECTION DATE Month    Day    Year 05    07    2016	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special										
<b>12</b> OFFICE	<table style="width:100%;"> <tr> <td style="width:50%;">                     OFFICE HELD (if any)                       Mayor, City of Harlingen                 </td> <td style="width:50%;"> <b>13</b> OFFICE SOUGHT (if known)                       Mayor, City of Harlingen                 </td> </tr> </table>			OFFICE HELD (if any)  Mayor, City of Harlingen	<b>13</b> OFFICE SOUGHT (if known)  Mayor, City of Harlingen						
OFFICE HELD (if any)  Mayor, City of Harlingen	<b>13</b> OFFICE SOUGHT (if known)  Mayor, City of Harlingen										

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

N/A

☐ SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 25,800.00

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 16,308.23

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 9,491.77

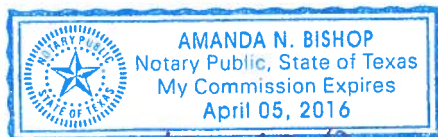
OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Christopher H. Boswell, this the 7th day of April, 2016, to certify which, witness my hand and seal of office.

Amanda N. Bishop

Signature of officer administering oath

Amanda N. Bishop

Printed name of officer administering oath

Notary Public

Title of officer administering oath

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 25,800.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 16,308.23
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 01/11/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID#: _____) Davis, Edward C. and Dee S. (s) 6 Contributor address; City; State; Zip Code 1401 Palm Valley Dr. East Harlingen, Tx 78552	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID#: _____) Woolam, Dennis and Lorraine Contributor address; City; State; Zip Code P.O. Box 2346 Harlingen, Tx 78551	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID#: _____) Loya, Francisco III Contributor address; City; State; Zip Code 1327 E. Washington #220 Harlingen, Tx 78550	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID#: _____) Robert and Ann Shephard Contributor address; City; State; Zip Code 5348 Papaya CR Harlingen, Tx 78552	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date /2016	7 Full name of contributor out-of-state PAC(ID#: _____) White, Joe T. 8 Contributor address; City; State; Zip Code 1605 Walnut Ct Harlingen, Tx 78550	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/21/2016	Full name of contributor out-of-state PAC(ID#: _____) Dunkin, Robert B. Contributor address; City; State; Zip Code 410 Retama Harlingen, Tx 78550	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2016	Full name of contributor out-of-state PAC(ID#: _____) Elizondo, Freddy Contributor address; City; State; Zip Code 1002 E Harrison Ave. Harlingen, Texas 78550	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/01/2016	Full name of contributor out-of-state PAC(ID#: _____) Davis, Jack Contributor address; City; State; Zip Code P.O. Box 703 Combes, Tx 78535	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 02/05/2016	9 Full name of contributor out-of-state PAC(ID# _____) Duncan, Robert 10 Contributor address; City; State; Zip Code P.O. Box 990 San Benito, Tx 78586	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/05/2016	Full name of contributor out-of-state PAC(ID# _____) Murphy, J. Neil Contributor address; City; State; Zip Code P.O. Box 893 San Benito, Tx 78586	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2016	Full name of contributor out-of-state PAC(ID# _____) Ewers, Norbert S. and Ruthie I. Contributor address; City; State; Zip Code 138 Palm Valley Dr. W. Harlingen, Tx 78552	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2016	Full name of contributor out-of-state PAC(ID# _____) Elkins, Mac Contributor address; City; State; Zip Code 5206 S. Expwy 83 Harlingen, Tx 78552	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 02/10/2016	11 Full name of contributor out-of-state PAC(ID#: Scaief, Michael and Elizabeth 12 Contributor address; City; State; Zip Code P.O. Box 1064 San Benito, Tx 78586	7 Amount of contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/11/2016	Full name of contributor out-of-state PAC(ID#: Scott, C. Michael Contributor address; City; State; Zip Code P.O. Box 502 Raymondville, Tx 78580	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2016	Full name of contributor out-of-state PAC(ID#: Trollinger, Jim Contributor address; City; State; Zip Code 22717 Briggs Coleman Harlingen, Tx 78550	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2016	Full name of contributor out-of-state PAC(ID#: Quisenberry, Greg & Judy Contributor address; City; State; Zip Code 22220 Stuart Place Rd Harlingen, Tx 78552-9801	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 02/16/2016	13 Full name of contributor out-of-state PAC(ID#: Banks, Ronald 14 Contributor address; City; State; Zip Code 3425 Spyglass Hill Dr. Harlingen, Tx 78550	7 Amount of contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/12/2016	Full name of contributor out-of-state PAC(ID#: Jones, Kent William Contributor address; City; State; Zip Code P.O. Box 2801 Harlingen, Tx 78551	Amount of contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2016	Full name of contributor out-of-state PAC(ID#: Leal, J.G. and Norma Contributor address; City; State; Zip Code 2726 Clifford Dr. Harlingen, Tx 78550	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC(ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 02/06/2016	5 Full name of contributor out-of-state PAC(ID#: Galbreath, Larry J. and Vicki P. 6 Contributor address; City; State; Zip Code 1408 Magnolia Court Harlingen, Tx 78550	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/19/2016	Full name of contributor out-of-state PAC(ID#: Fields, Joshua M. and De la Garza-Fields, Mia Contributor address; City; State; Zip Code 2632 Clifford Dr. Harlingen, Tx 78550	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2016	Full name of contributor out-of-state PAC(ID#: Boggus, Frank N. Contributor address; City; State; Zip Code P.O. Box 1111 Harlingen, Tx 78551	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2016	Full name of contributor out-of-state PAC(ID#: Lopez, Nemecio E. Jr. Contributor address; City; State; Zip Code 1314 E. Harrison Ave. Harlingen, Tx 78550	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME Chris Boswell

3 Filer ID (Ethics Commission Filers)

4 Date  
02/18/2016

5 Full name of contributor out-of-state PAC(ID#:  
Menchaca, Juan

7 Amount of contribution (\$)  
\$ 50.00

6 Contributor address; City; State; Zip Code  
27300 S. Paloma Ln Harlingen, Tx 78552

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor out-of-state PAC(ID#:  
02/24/2016 Jenkins, Raymond and Esther

Amount of contribution (\$)

\$200.00

Contributor address; City; State; Zip Code  
224 Pineridge Ln McAllen, Tx 78503

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC(ID#:  
02/22/2016 Elliff, William and Merrillee

Amount of contribution (\$)

\$500.00

Contributor address; City; State; Zip Code  
27143 State Hwy 345 San Benito, Tx 78586

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC(ID#:  
02/20/2016 Duncan, Robert

Amount of contribution (\$)

\$500.00

Contributor address; City; State; Zip Code  
4501 Mountain Creek Pkwy Dallas, Tx 75236

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 02/22/2016	5 Full name of contributor Elliff, Joe D. out-of-state PAC(ID#: _____) 6 Contributor address; 1307 W. Harrison Ave. City; State; Zip Code Harlingen, Tx 78550	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/29/2016	Full name of contributor Uhlhorn, Martha out-of-state PAC(ID#: _____) Contributor address; 2601 S. 77 Sunshine Strip City; State; Zip Code Harlingen, Tx 78550	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/29/2016	Full name of contributor Uhlhorn Allen, Julie out-of-state PAC(ID#: _____) Contributor address; 2601 S. 77 Sunshine Strip City; State; Zip Code Harlingen, Tx 78550	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/02/2016	Full name of contributor Komegay, Pat out-of-state PAC(ID#: _____) Contributor address; 28125 Norma Linda City; State; Zip Code San Benito, Tx 78586	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1:
2 FILER NAME Chris Boswell			3 Filer ID (Ethics Commission Filers)
4 Date 03/01/2016	5 Full name of contributor Nott, Deborah out-of-state PAC(ID#: _____) 6 Contributor address; P.O. Box 102 City; State; Zip Code Harlingen, Tx 78551	7 Amount of contribution (\$) \$100.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date 02/17/2016	Full name of contributor Kininmonth, Warren and Kaye out-of-state PAC(ID#: _____) Contributor address; 1000 Camelot Dr. Apt 6103 Harlingen, Tx 78550 City; State; Zip Code	Amount of contribution (\$) \$100.00	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/04/2016	Full name of contributor Perez, Nolan & Sandy out-of-state PAC(ID#: _____) Contributor address; 512 Victoria Ln, Ste 2 Harlingen, Tx 78550 City; State; Zip Code	Amount of contribution (\$) \$1,000.00	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/08/2016	Full name of contributor Peacock, William T. out-of-state PAC(ID#: _____) Contributor address; P.O. Box 530098 Harlingen, Tx 78553 City; State; Zip Code	Amount of contribution (\$) \$100.00	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 03/10/2016	5 Full name of contributor out-of-state PAC(ID#: Ledesma, Rick 6 Contributor address; City; State; Zip Code 1317 Palm Valley East Harlingen, Tx 78552	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/11/2016	Full name of contributor out-of-state PAC(ID#: Burke, Bryan and Linda Contributor address; City; State; Zip Code 1101 Ferguson Dr. Harlingen, Tx 78560	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/15/2016	Full name of contributor out-of-state PAC(ID#: Martin, Louis F. Jr. and Mary Ann Contributor address; City; State; Zip Code 1821 Mockingbird Ln Harlingen, Tx 78550	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/15/2016	Full name of contributor out-of-state PAC(ID#: Knight, Jr., Bob M. and Frances Contributor address; City; State; Zip Code 1629 Throckmorton Harlingen, Tx 78550	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 03/15/2016	5 Full name of contributor out-of-state PAC(ID#: _____) Polley, Eric A. and Knight, Sumer R 6 Contributor address; City; State; Zip Code 22964 Monte Alto Ct Apt. 2 Harlingen, Tx 78550	7 Amount of contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/16/2016	Full name of contributor out-of-state PAC(ID#: _____) Zertuche, Arturo R. Contributor address; City; State; Zip Code 2702 Becky Lane Harlingen, Tx 78550	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2016	Full name of contributor out-of-state PAC(ID#: _____) Meade, Jonathan and Elena Contributor address; City; State; Zip Code 427 Woodland Harlingen, Tx 78550	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2016	Full name of contributor out-of-state PAC(ID#: _____) Ely, Donald M. and Sopa N. Contributor address; City; State; Zip Code 14395 Ewing Dr. Harlingen, Tx 78552	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 03/17/2016	5 Full name of contributor out-of-state PAC(ID#: Farris, Robert R. 6 Contributor address; City; State; Zip Code P.O. Box 1870 Harlingen, Tx 78551	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/17/2016	Full name of contributor out-of-state PAC(ID#: White, Joan Contributor address; City; State; Zip Code 1136 Fairway Lane Harlingen, Tx 78552	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/17/2016	Full name of contributor out-of-state PAC(ID#: Hale, Frank and Machietto, Lupita Contributor address; City; State; Zip Code 5601 Wild Oak Ct Harlingen, Tx 78552	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/17/2016	Full name of contributor out-of-state PAC(ID#: Cantu, B., Jr and Cantu, Mrs. M. G. Contributor address; City; State; Zip Code 1408 Pine Ct Harlingen, Tx 78550	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 02/24/2016	5 Full name of contributor out-of-state PAC(ID#: _____) Law Office of John King 6 Contributor address; City; State; Zip Code 3409 N. 10th, Suite 100 McAllen, Tx 78501	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/17/2016	Full name of contributor out-of-state PAC(ID#: _____) De La Garza, Connie Contributor address; City; State; Zip Code 503 E. Harrison Harlingen, Tx 78550	Amount of contribution (\$) \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/21/2016	Full name of contributor out-of-state PAC(ID#: _____) Moore, Victoria and Parke T. Contributor address; City; State; Zip Code 1821 Elmwood Dr. Harlingen, Tx 78550	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/22/2016	Full name of contributor out-of-state PAC(ID#: _____) Denison, James and Anne Contributor address; City; State; Zip Code 1827 Sam Houston St. Harlingen, Tx 78550	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 03/22/2016	5 Full name of contributor out-of-state PAC(ID#: Gerber, Steven J. 6 Contributor address; City; State; Zip Code 5605 Wild Oak Harlingen, Tx 78552	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/21/2016	Full name of contributor out-of-state PAC(ID#: Navarro, Ricardo & Donna Contributor address; City; State; Zip Code 2909 Clifford Dr. Harlingen, Tx 78550	Amount of contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/21/2016	Full name of contributor out-of-state PAC(ID#: Kimball, William F. – Law Offices of Contributor address; City; State; Zip Code 312 E. Van Buren Harlingen, Tx 78550	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/20/2016	Full name of contributor out-of-state PAC(ID#: Hughes, Roger and Russell-Hughes, Esther Contributor address; City; State; Zip Code 556 Lake Dr. Harlingen, Tx 78550	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 03/22/2016	5 Full name of contributor Debrooke, R. William out-of-state PAC(ID#: _____) 6 Contributor address; P.O. Box 2723 City; State; Zip Code Harlingen, Tx 78551	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/18/2016	Full name of contributor Rozell, Andrew out-of-state PAC(ID#: _____) Contributor address; 24168 Dilworth Rd City; State; Zip Code Harlingen, Tx 78552	Amount of contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/22/2016	Full name of contributor Lonon, Kathleen D. out-of-state PAC(ID#: _____) Contributor address; 5218 Palm Valley Dr. S City; State; Zip Code Palm Valley, Tx 78552	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/23/2016	Full name of contributor Hall, Brendan and Ann E. out-of-state PAC(ID#: _____) Contributor address; 1806 Laurel Dr. City; State; Zip Code Harlingen, Tx 78550	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 03/25/2016	5 Full name of contributor out-of-state PAC(ID#: _____) Anderson, Quentin & Eileen 6 Contributor address; City; State; Zip Code 14823 S. Valencia Cir. Harlingen, Tx 78552	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/23/2016	Full name of contributor out-of-state PAC(ID#: _____) Vittitoe, Craig H. and Gail Contributor address; City; State; Zip Code 2810 Becky Ln Harlingen, Tx 78550	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/24/2016	Full name of contributor out-of-state PAC(ID#: _____) Magdalena, Gordon A. and Rebecca S. Contributor address; City; State; Zip Code 1806 Little Creek Harlingen, Tx 78550	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/21/2016	Full name of contributor out-of-state PAC(ID#: _____) Simmons, Mary Beth Contributor address; City; State; Zip Code 19573 Simmons Rd San Benito, Tx 78586	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 03/28/2016	5 Full name of contributor out-of-state PAC(ID#: _____) Dunkin, Eloise Ann 6 Contributor address; City; State; Zip Code 410 Retama Pl Harlingen, Tx 78550	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/26/2016	Full name of contributor out-of-state PAC(ID#: _____) Burns, Bill and Joy Contributor address; City; State; Zip Code 1024 N. 77 Sunshine Strip Harlingen, Tx 78550	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/29/2016	Full name of contributor out-of-state PAC(ID#: _____) Dahm, Lawrence and Charlotte Contributor address; City; State; Zip Code 2938 Lazy Lake Dr. Harlingen, Tx 78550	Amount of contribution (\$) \$ 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/29/2016	Full name of contributor out-of-state PAC(ID#: _____) Flinn, Owen R. and Anna C. Contributor address; City; State; Zip Code P.O. Box 2245 Harlingen, Tx 78551	Amount of contribution (\$) \$ 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 03/29/2016	5 Full name of contributor out-of-state PAC(ID#: Rodriguez, Raul and Tirado, Angeles Pluma 6 Contributor address; City; State; Zip Code 1701 S. Palm Blvd Harlingen, Tx 78552	7 Amount of contribution (\$) \$ 50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/29/2016	Full name of contributor out-of-state PAC(ID#: Leal, Ricardo Contributor address; City; State; Zip Code 5410 Catlin Ct. Harlingen, Tx 78552	Amount of contribution (\$) \$ 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/29/2016	Full name of contributor out-of-state PAC(ID#: Johnston, Marguerite Ann and Vernon C., Jr. Contributor address; City; State; Zip Code 2619 Clifford Dr. Harlingen, Tx 78550	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/29/2016	Full name of contributor out-of-state PAC(ID#: Taubert, Sue A. and James B Contributor address; City; State; Zip Code P.O. Box 827 Rio Hondo, Tx 78583	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 03/292016	5 Full name of contributor Yates, Mark and Nancy 6 Contributor address; 518 Lake Dr. City; State; Zip Code Harlingen, Tx 78550 out-of-state PAC(ID#: _____)	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/292016	Full name of contributor Mount, William D. Contributor address; 1014 Ferguson City; State; Zip Code Harlingen, Tx 78550 out-of-state PAC(ID#: _____)	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/292016	Full name of contributor Swanson, Sharon and C. A. III Contributor address; 2159 Shadowbrook Cir. City; State; Zip Code Harlingen, Tx 78550 out-of-state PAC(ID#: _____)	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date /2016	Full name of contributor Contributor address; City; State; Zip Code out-of-state PAC(ID#: _____)	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 03/29/2016	5 Full name of contributor out-of-state PAC(ID#: Lamotte, Thomas S. and Shirley A. 6 Contributor address; City; State; Zip Code 31073 S. Sam Houston San Benito, Tx 78586	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/29/2016	Full name of contributor out-of-state PAC(ID#: Phipps, Marcus and Lisa Contributor address; City; State; Zip Code 1620 S. Paloma Lane Harlingen, Tx 78552	Amount of contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/29/2016	Full name of contributor out-of-state PAC(ID#: Pearcy, John and Carla Contributor address; City; State; Zip Code 561 Lake Dr. Harlingen, Tx 78550	Amount of contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/29/2016	Full name of contributor out-of-state PAC(ID#: Leal, Victor D. Contributor address; City; State; Zip Code 2225 W. Arbor St. Harlingen, Tx 78552	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 03/29/2016	5 Full name of contributor out-of-state PAC(ID#: Elizarde, Debbie and Armando Jr. 6 Contributor address; City; State; Zip Code P.O. 2934 Harlingen, Tx 78551	7 Amount of contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/29/2016	Full name of contributor out-of-state PAC(ID#: Guevara, John D. & Joanne L. Contributor address; City; State; Zip Code 3205 Seminole Court Harlingen, Tx 78550	Amount of contribution (\$) \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/29/2016	Full name of contributor out-of-state PAC(ID#: Murphy, Michael M. Contributor address; City; State; Zip Code 1102 Ferguson Dr. Harlingen, Tx 78550	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/29/2016	Full name of contributor out-of-state PAC(ID#: Simmons, C.R., MD Contributor address; City; State; Zip Code 351 N. Sam Houston San Benito, Tx 78586	Amount of contribution (\$) \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 03/29/2016	5 Full name of contributor out-of-state PAC(ID# _____) Roberts, Henry and Kelly K 6 Contributor address; City; State; Zip Code 2801 Pine Valley Dr. Harlingen, Tx 78550	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/29/2016	Full name of contributor out-of-state PAC(ID# _____) Whittington, Randolph Kimble Contributor address; City; State; Zip Code 2014 E. Harrison St. Harlingen, Tx 78550	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/29/2016	Full name of contributor out-of-state PAC(ID# _____) Johnson, Alan L. Contributor address; City; State; Zip Code 28977 Altas Palmas Rd Harlingen, Tx 78552	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/29/2016	Full name of contributor out-of-state PAC(ID# _____) Rubiano, Rolando R. and Cynthia C. Contributor address; City; State; Zip Code 518 E. Woodland Dr. Harlingen, Tx 78550	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 03/29/2016	5 Full name of contributor out-of-state PAC(ID#: Flinn, David 6 Contributor address; City; State; Zip Code 1405 N. Stuart Place Harlingen, Tx 78552	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/29/2016	Full name of contributor out-of-state PAC(ID#: Gonzalez, Ramiro, Jr. and Nadine P. Contributor address; City; State; Zip Code 2690 N. Sam Houston San Benito, Tx 78586	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/29/2016	Full name of contributor out-of-state PAC(ID#: McCullough & McCullough, Attorneys at Law Contributor address; City; State; Zip Code P.O. Box 2244 Harlingen, Tx 78551	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/29/2016	Full name of contributor out-of-state PAC(ID#: Mezmar, Cathy Contributor address; City; State; Zip Code 2045 Ravenwood Ln Harlingen, Tx 78550	Amount of contribution (\$) \$ 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 03/30/2016	5 Full name of contributor out-of-state PAC(ID#: Haire, Donald W. 6 Contributor address; City; State; Zip Code 405 Woodland Harlingen, Tx 78550	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/31/2016	Full name of contributor out-of-state PAC(ID#: Smith, David R. & Pamela B. Contributor address; City; State; Zip Code 1626 Sam Houston Harlingen, Tx 78550	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/01/2016	Full name of contributor out-of-state PAC(ID#: Preddy, Kathy Contributor address; City; State; Zip Code 2814 Loretta Dr. Harlingen, Tx 78550	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/31/2016	Full name of contributor out-of-state PAC(ID#: Harris, Max Y., M.D. and Mrs. Max Harris Contributor address; City; State; Zip Code 126 Arcadia Harlingen, Tx 78550	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME' Chris Boswell	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 01/14/2016	<b>5</b> Payee name Residence Inn - Marriott	
<b>6</b> Amount (\$) \$100.00	<b>7</b> Payee address; City; State; Zip Code 109 Bass Pro Drive Harlingen, Tx 78552	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Re-election Reception, Meeting room
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

Date 01/12/2016	Payee name Meade Marketing, Inc.	
Amount (\$) \$178.62	Payee address; City; State; Zip Code 211 W. Jefferson, Ste 7 Harlingen, Tx 78550	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Event invitation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

Date 02/01/2016	Payee name Voter's Voice RGV Magazine (Silber Trevino)	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 110 Regency Ct Harlingen, Tx 78550	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Magazine ad
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME' Chris Boswell		3 Filer ID (Ethics Commission Filers)	
4 Date 03/05/2016		5 Payee name McCoy's			
6 Amount (\$) \$132.03		7 Payee address; City; State; Zip Code 3601 W Expy 83, Harlingen, Tx 78552			
8 <b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule) [Other]: Sign posting supplies		(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Stakes	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 02/18/2016		Payee name Meade Marketing, Inc.			
Amount (\$) \$2,690.08		Payee address; City; State; Zip Code 211 W. Jefferson, Ste 7 Harlingen, Tx 78550			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Advertising		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Outdoor, Production	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 03/11/2016		Payee name Meade Marketing, Inc.			
Amount (\$) \$10,658.27		Payee address; City; State; Zip Code 211 W. Jefferson, Ste 7 Harlingen, Tx 78550			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Advertising		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Outdoor, Signs, Production	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME' Chris Boswell		3 Filer ID (Ethics Commission Filers)	
4 Date 03/15/2016		5 Payee name McCoy's			
6 Amount (\$) \$172.31		7 Payee address; City; State; Zip Code 3601 W Expy 83, Harlingen, Tx 78552			
8 <b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule) [Other]: Sign posting supplies		(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Posts	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 02/18/2016		Payee name Allegra Printing			
Amount (\$) \$173.08		Payee address; City; State; Zip Code 1801 S. 77 Sunshine Strip, Harlingen, Tx 78550			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Printing expenses		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Push cards	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 03/11/2016		Payee name Ray Candia			
Amount (\$) \$500.00		Payee address; City; State; Zip Code P.O. Box 157 Santa Rosa, Tx 78593			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Sign set-up	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME' Chris Boswell		3 Filer ID (Ethics Commission Filers)	
4 Date 03/20/2016		5 Payee name Ray Candia			
6 Amount (\$) \$550.00		7 Payee address; City; State; Zip Code P.O. Box 157 Santa Rosa, Tx 78593			
8 <b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Sign set-up	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 03/29/2016		Payee name Golden Palms			
Amount (\$) \$653.84		Payee address; City; State; Zip Code 2101 Treasure Hills Blvd, Harlingen, TX 78550			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Event expense		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Food & beverage	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 02/01/2016		Payee name			
Amount (\$) \$		Payee address; City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**